

WWII Prisoner of War Promotion Back Pay Application

Privacy Notice: In accordance with the Privacy Act of 1974 (Public Law 93-579), this notice informs you of the purpose of the requested information and how it will be used. Please read it carefully.

Authority: 5 USC 301, Departmental Regulations; E.O. 9397 (SSN); and Floyd D. Spence National Defense Authorization Act for Fiscal Year 2001. Section 667 (Public Law 106-259).

Principal Purpose: Information provided will be used to determine eligibility for pay entitlements as authorized by Public Law 106-259.

Routine Uses: Used by Navy and Marine Corps offices to determine eligibility and then sent to DFAS for payment.

Disclosures: Voluntary. However, failure to provide information may result in our inability to approve the claim.

Veteran's Full Name (Last, First, Middle)

Service Number

Date of Birth

Place of Birth

Place of Entry into Service

Current Address (Street, Apartment Number, City, State, Zip Code)

Branch of Service (Circle One)

Navy

Marine Corps

Telephone Number (with Area Code)

Dates of Internment

Rank at Internment

Date of Repatriation

Rank at Discharge

Date of Discharge

Veteran's Social Security Number _____

If veteran is deceased, the surviving spouse is also requested to provide the following information:

Date of Death _____ *(Include copy of Death Certificate)*

Full Name of Surviving Spouse (Last, First, Middle)

Spouse's Social Security Number

Date of Marriage _____ *(Include copy of Marriage License)*

Current Address (Street, Apartment Number, City, State, Zip Code)

Surviving Spouse's Telephone Number (including Area Code) _____